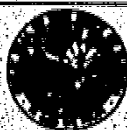


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N26704 (9)

1. Corporation Name

TAMPA BAY CHAPTER OF THE INTERNATIONAL ASSOCIATION FOR FINANCIAL PLANNING, INC.

Principal Place of Business

Mailing Address

**JULIA A. LENTZ
7845 QUAIL HOLLOW BLVD.
WESLEY CHAPEL FL 33544-2025**

**JULIA A. LENTZ
7845 QUAIL HOLLOW BLVD.
WESLEY CHAPEL FL 33544-2025
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/31/1988

3a. Date of Last Report

04/19/1994

4. FEI Number

59-1792226

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has facility for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LENTZ, JULIA A.
7845 QUAIL HOLLOW BLVD.
WESLEY CHAPEL FL 33544**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
C	ROESER, RONALD H	4175 E BAY DR	LARGO FL
T	SHUTE, KAREN P	10002 PRINCESS PALM AVE	TAMPA FL
V	SNYDER, GINGER R	5300 W. CYPRESS ST.	TAMPA FL
D	BERG, NAOMI	1919 OXFORD STR	ST PETERSBURG FL
P	MARTIN, LES	201 HIGHLAND AVE	LARGO FL
V	COTTER, GARY W	410 WARE BLVD	TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
D	OGIBSON, STEPHEN K.	2323 CURLEW ROAD	PALM HARBOR FL 34683
T	TOBIN, DAVID J.	700 CENTRAL AVE.	ST. PETERSBURG FL 33701
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
D	HARBEITNER, DAVID	2000-66TH STREET N.	ST. PETERSBURG FL 33710
C			
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP
P			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

David S. Tobin (DAVID S. TOBIN)

4-19-95 (813) 823-8712

Date Daytime Phone